

GAU 1615

Please type a plus sign (+) inside this box → ☒PTO/SB/21 (12-97)  
Approved for use through 9/30/00. OMB 0651-0031  
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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# TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Including this page  
Total Number of Pages in This Submission

|                        |                      |
|------------------------|----------------------|
| Application Number     | 08/849,525           |
| Filing Date            | August 29, 1997      |
| First Named Inventor   | Lanzendorfer, et al. |
| Group Art Unit         | 1615                 |
| Examiner Name          | J. Venkat            |
| Attorney Docket Number | Beiersdorf 435-WCG   |

## ENCLOSURES (check all that apply)

|   |   |   |
|---|---|---|
| <input checked="" type="checkbox"/> Fee Transmittal Form<br><input type="checkbox"/> Fee Attached<br><input checked="" type="checkbox"/> Amendment / Response<br><input type="checkbox"/> After Final<br><input type="checkbox"/> Affidavits/declaration(s)<br><input checked="" type="checkbox"/> Extension of Time Request<br><input type="checkbox"/> Express Abandonment Request<br><input type="checkbox"/> Information Disclosure Statement<br><input type="checkbox"/> Certified Copy of Priority Document(s)<br><input type="checkbox"/> Response to Missing Parts/Incomplete Application<br><input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Assignment Papers (for an Application)<br><input type="checkbox"/> Drawing(s)<br><input type="checkbox"/> Licensing-related Papers<br><input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition<br><input type="checkbox"/> To Convert a Provisional Application<br><input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address<br><input type="checkbox"/> Terminal Disclaimer<br><input type="checkbox"/> Small Entity Statement<br><input type="checkbox"/> Request for Refund | <input type="checkbox"/> After Allowance Communication to Group<br><input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences<br><input checked="" type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)<br><input type="checkbox"/> Proprietary Information<br><input type="checkbox"/> Status Letter<br><input type="checkbox"/> Additional Enclosure(s) (please identify below) |
|---|---|---|

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Remarks

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

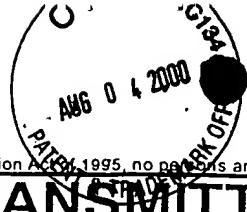
|                         |                                  |
|-------------------------|----------------------------------|
| Firm or Individual name | NORRIS MCLAUGHLIN & MARCUS, P.A. |
| Signature               |                                  |
| Date                    | 8/1/00                           |

## CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on this date: 8/1/00

|                       |                   |
|-----------------------|-------------------|
| Typed or printed name | Adrienne C. Dorio |
| Signature             |                   |
| Date                  | 8/1/00            |

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.



# FEE TRANSMITTAL

## for FY 2000

Patent fees are subject to annual revision.  
Small Entity payments must be supported by a small entity statement, otherwise large entity fees must be paid. See Forms PTO/SB/09-12. See 37 C.F.R. §§ 1.27 and 1.28.

TOTAL AMOUNT OF PAYMENT (\$) 1170

### Complete if Known

|                      |                      |
|----------------------|----------------------|
| Application Number   | 08/849,525           |
| Filing Date          | 08/29/1997           |
| First Named Inventor | Lanzendorfer, et al. |
| Examiner Name        | J. Venkat            |
| Group / Art Unit     | 1615                 |
| Attorney Docket No.  | Beiersdorf 435-WCG   |

### METHOD OF PAYMENT (check one)

1. ☒ The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number: Norris McLaughlin & Marcus

Deposit Account Name: 14-1263

☒ Charge Any Additional Fee Required Under 37 CFR §§ 1.16 and 1.17

2. ☐ Payment Enclosed:

☐ Check ☐ Money Order ☐ Other

### FEE CALCULATION

| 1. BASIC FILING FEE |                   |          |          |                        |          |
|---------------------|-------------------|----------|----------|------------------------|----------|
| Large Entity Code   | Small Entity Code | Fee (\$) | Fee (\$) | Fee Description        | Fee Paid |
| 101                 | 690               | 201      | 345      | Utility filing fee     |          |
| 106                 | 310               | 206      | 155      | Design filing fee      |          |
| 107                 | 480               | 207      | 240      | Plant filing fee       |          |
| 108                 | 690               | 208      | 345      | Reissue filing fee     |          |
| 114                 | 150               | 214      | 75       | Provisional filing fee |          |
| SUBTOTAL (1)        |                   |          |          |                        | (\$)     |

2. EXTRA CLAIM FEES

|                    |             |              |             |                |             |             |             |
|--------------------|-------------|--------------|-------------|----------------|-------------|-------------|-------------|
| Total Claims       | <u>    </u> | Extra Claims | <u>    </u> | Fee from below | <u>    </u> | Fee Paid    | <u>    </u> |
| Independent Claims | <u>    </u> | -20**        | <u>    </u> | X              | <u>    </u> | <u>    </u> | <u>    </u> |
| Multiple Dependent | <u>    </u> | -3**         | <u>    </u> | X              | <u>    </u> | <u>    </u> | <u>    </u> |

\*\*or number previously paid, if greater; For Reissues, see below

| Large Entity Code | Small Entity Code | Fee (\$) | Fee (\$) | Fee Description  |      |
|-------------------|-------------------|----------|----------|--|------|
| 103               | 18                | 203      | 9        | Claims in excess of 20                                     |      |
| 102               | 78                | 202      | 39       | Independent claims in excess of 3                          |      |
| 104               | 260               | 204      | 130      | Multiple dependent claim, if not paid                      |      |
| 109               | 78                | 209      | 39       | ** Reissue independent claims over original patent         |      |
| 110               | 18                | 210      | 9        | ** Reissue claims in excess of 20 and over original patent |      |
| SUBTOTAL (2)      |                   |          |          |  | (\$) |

### FEE CALCULATION (continued)

| Large Entity Code                  | Small Entity Code | Fee (\$) | Fee (\$) | Fee Description  | Fee Paid     |
|------------------------------------|-------------------|----------|----------|--|--------------|
| 105                                | 130               | 205      | 65       | Surcharge - late filing fee or oath  |              |
| 127                                | 50                | 227      | 25       | Surcharge - late provisional filing fee or cover sheet                     |              |
| 139                                | 130               | 139      | 130      | Non-English specification  |              |
| 147                                | 2,520             | 147      | 2,520    | For filing a request for reexamination                                     |              |
| 112                                | 920*              | 112      | 920*     | Requesting publication of SIR prior to Examiner action                     |              |
| 113                                | 1,840*            | 113      | 1,840*   | Requesting publication of SIR after Examiner action                        |              |
| 115                                | 110               | 215      | 55       | Extension for reply within first month                                     |              |
| 116                                | 380               | 216      | 190      | Extension for reply within second month                                    |              |
| 117                                | 870               | 217      | 435      | Extension for reply within third month                                     | 870.00       |
| 118                                | 1,360             | 218      | 680      | Extension for reply within fourth month                                    |              |
| 128                                | 1,850             | 228      | 925      | Extension for reply within fifth month                                     |              |
| 119                                | 300               | 219      | 150      | Notice of Appeal   | 300.00       |
| 120                                | 300               | 220      | 150      | Filing a brief in support of an appeal                                     |              |
| 121                                | 260               | 221      | 130      | Request for oral hearing   |              |
| 138                                | 1,510             | 138      | 1,510    | Petition to institute a public use proceeding                              |              |
| 140                                | 110               | 240      | 55       | Petition to revive - unavoidable   |              |
| 141                                | 1,210             | 241      | 605      | Petition to revive - unintentional   |              |
| 142                                | 1,210             | 242      | 605      | Utility issue fee (or reissue)   |              |
| 143                                | 430               | 243      | 215      | Design issue fee   |              |
| 144                                | 580               | 244      | 290      | Plant issue fee  |              |
| 122                                | 130               | 122      | 130      | Petitions to the Commissioner  |              |
| 123                                | 50                | 123      | 50       | Petitions related to provisional applications                              |              |
| 126                                | 240               | 126      | 240      | Submission of Information Disclosure Stmt                                  |              |
| 581                                | 40                | 581      | 40       | Recording each patent assignment per property (times number of properties) |              |
| 146                                | 690               | 246      | 345      | Filing a submission after final rejection (37 CFR § 1.129(a))              |              |
| 149                                | 690               | 249      | 345      | For each additional invention to be examined (37 CFR § 1.129(b))           |              |
| Other fee (specify)                |                   |          |          |  |              |
| Other fee (specify)                |                   |          |          |  |              |
| * Reduced by Basic Filing Fee Paid |                   |          |          |  |              |
| SUBTOTAL (3)                       |                   |          |          |  | (\$) 1170.00 |

|                   |                               |                                   |        |                          |              |
|-------------------|-------------------------------|-----------------------------------|--------|--------------------------|--------------|
| SUBMITTED BY      |                               |                                   |        | Complete (if applicable) |              |
| Name (Print/Type) | William C. Gerstenzang        | Registration No. (Attorney/Agent) | 27,552 | Telephone                | 914 332 1700 |
| Signature         | <i>William C. Gerstenzang</i> |                                   |        | Date                     | 8/1/00       |

### WARNING:

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